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                                                                   HOUSE FILE 2780
                                             AN ACT
   4 RELATING TO PERSONS WITH MENTAL ILLNESS, MENTAL RETARDATION,
5 DEVELOPMENTAL DISABILITIES, OR BRAIN INJURY BY ADDRESSING
           PURPOSES AND QUALITY STANDARDS FOR SERVICES AND OTHER
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           SUPPORT AVAILABLE FOR SUCH PERSONS, ESTABLISHING BASIC
           FINANCIAL ELIGIBILITY STANDARDS, ADDRESSING STATE AND COUNTY FINANCIAL RESPONSIBILITY FOR THE COST OF THE SERVICES AND
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           OTHER SUPPORT, CHANGING THE NAME OF A DEPARTMENTAL DIVISION,
           PROVIDING FOR AN INCREASE IN THE REIMBURSEMENT OF CERTAIN
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           SERVICE PROVIDERS, AND PROVIDING EFFECTIVE AND APPLICABILITY
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           DATES.
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1 15 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:
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                                          DIVISION I
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                            PURPOSES AND QUALITY STANDARDS
1 19 Section 1. Section 125.82, subsection 3, Code 2005, as 1 20 amended by 2006 Iowa Acts, Senate File 2362, section 1, if
1 21 enacted, and 2006 Iowa Acts, Senate File 2217, section 30, if
  22 enacted, is amended to read as follows:
23 3. The person who filed the application and a licensed
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1 24 physician, or qualified mental health professional as defined 1 25 in section 229.1 228.1, or certified alcohol and drug 1 26 counselor certified by the nongovernmental Iowa board of
   27 substance abuse certification who has examined the respondent
1 28 in connection with the commitment hearing shall be present at
1 29 the hearing, unless the court for good cause finds that their 1 30 presence or testimony is not necessary. The applicant,
1 31 respondent, and the respondent's attorney may waive the
  32 presence or telephonic appearance of the licensed physician,
   33 or qualified mental health professional, or certified alcohol
   34 and drug counselor who examined the respondent and agree to
   35 submit as evidence the written report of the licensed 1 physician, or qualified mental health professional, or
    2 certified alcohol and drug counselor. The respondent's
    3 attorney shall inform the court if the respondent's attorney
   4 reasonably believes that the respondent, due to diminished 5 capacity, cannot make an adequately considered waiver
    6 decision. "Good cause" for finding that the testimony of the
    7 licensed physician, or qualified mental health professional,
    8 or certified alcohol and drug counselor who examined the
   9 respondent is not necessary may include, but is not limited
2 10 to, such a waiver. If the court determines that the testimony
2 11 of the licensed physician, or qualified mental health 2 12 professional, or certified alcohol and drug counselor is
2 13 necessary, the court may allow the licensed physician, or
  14 qualified mental health professional, or certified alcohol and 15 drug counselor to testify by telephone. The respondent shall
2 16 be present at the hearing unless prior to the hearing the 2 17 respondent's attorney stipulates in writing that the attorney 2 18 has conversed with the respondent, and that in the attorney's
2 19 judgment the respondent cannot make a meaningful contribution
2 20 to the hearing, or that the respondent has waived the right to 2 21 be present, and the basis for the attorney's conclusions. A 2 22 stipulation to the respondent's absence shall be reviewed by
   23 the court before the hearing, and may be rejected if it
   24 appears that insufficient grounds are stated or that the
  25 respondent's interests would not be served by the respondent's
  26 absence.
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                      Section 225C.1, Code 2005, is amended to read as
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           Sec. 2.
  28 follows:
           225C.1 FINDINGS AND PURPOSE.
  30 \underline{1}. The general assembly finds that services to persons 31 with mental illness, mental retardation, developmental
  32 disabilities, or brain injury are provided in many parts of 33 the state by highly autonomous community=based service
   34 providers working cooperatively with state and county
2 35 officials. However, the general assembly recognizes that
   1 heavy reliance on property tax funding for mental health and
    2 mental retardation services has restricted uniform
    3 availability of this care enabled many counties to exceed
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4 minimum state standards for the services resulting in 5 uneven level of services around the state. Consequently 6 greater efforts should be made to assure close coordination 7 and continuity of care for those persons receiving publicly 8 supported disability services in Iowa. It is the purpose of 9 this chapter to continue and to strengthen the services to 3 10 persons with disabilities now available in the state of Iowa, 3 11 to make these disability services conveniently available to 3 12 all persons in this state upon a reasonably uniform financial 3 13 basis, and to assure the continued high quality of these 3 14 services.

2. It is the intent of the general assembly that the 3 16 service system for persons with disabilities emphasize the 17 ability of persons with disabilities to exercise their own 3 18 choices about the amounts and types of services received; that 3 19 all levels of the service system seek to empower persons with 20 disabilities to accept responsibility, exercise choices, and 21 take risks; that disability services are individualized, 22 provided to produce results, flexible, and cost=effective; and 23 that <u>disability</u> services be provided in a manner which 3 24 supports the ability of persons with disabilities to live, 3 25 learn, work, and recreate in natural communities of their 3 26 choice.

27 Sec. 3. Section 225C.2, subsection 6, Code 2005, is 28 amended to read as follows:

6. "Disability services" means services or and other 3 30 assistance support available to a person with mental illness, 31 mental retardation or other developmental disability, or brain 3 32 injury.

Section 225C.4, subsection 1, paragraph d, Code Sec. 4.

34 2005, is amended to read as follows: 35 d. Encourage and facilitate coordination of disability 35 services with the objective of developing and maintaining in the state a disability service delivery system to provide 3 disability services to all persons in this state who need the 4 services, regardless of the place of residence or economic 5 circumstances of those persons. The administrator shall work 6 with the commission and other state agencies, including but 7 not limited to the departments of corrections, education, and 8 public health and the state board of regents to develop and 4 9 implement a strategic plan to expand access to qualified 4 10 mental health workers across the state.

Sec. 5. Section 225C.4, subsection 1, paragraph j, Code 4 12 2005, is amended to read as follows:

4 13 Establish and maintain a data collection and management 4 14 information system oriented to the needs of patients, 4 15 providers, the department, and other programs or facilities. The administrator shall annually submit to the commission information collected by the department indicating the changes 4 18 and trends in the disability services system.

19 Sec. 6. Section 225C.6, subsection 1, paragraph n, Code 4 20 2005, is amended to read as follows:

n. Identify basic disability services for planning 4 22 purposes disability services outcomes and indicators to support the ability of eligible persons with a disability to 4 24 live, learn, work, and recreate in communities of the persons 4 25 choice. The identification duty includes but is not limited 26 to responsibility for identifying, collecting, and analyzing 27 data as necessary to issue reports on outcomes and indicators 4 28 at the county and state levels.

Section 225C.27, Code 2005, is amended to read as Sec. 7. 4 30 follows:

225C.27 PURPOSE.

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Sections 225C.25 through 225C.28B shall be liberally 33 construed and applied to promote their purposes and the stated 34 rights and service quality standards. The commission, in 35 coordination with appropriate agencies, shall adopt rules to implement the purposes of section 225C.28B, subsections 3 and 4, which include, but are not limited to, the following:

- Promotion of the human dignity and protection of the 4 constitutional and statutory rights of persons with mental 5 retardation, developmental disabilities, brain injury, or 6 chronic mental illness in the state.
- 2. Encouraging the development of the ability and potential of each person with mental retardation, developmental disabilities, brain injury, or chronic mental 10 illness in the state to the fullest extent possible.

3. Encouraging activities to ensure that recipients of services shall not be deprived of any rights, benefits, or 11 13 privileges guaranteed by law, the Constitution of the State of 14 Iowa, or the Constitution of the United States solely on 5 15 account of the receipt of the services.

4. Promoting access by each person in the state with 5 17 mental retardation, developmental disabilities, brain injury, 5 18 or chronic mental illness to effective services and other 5 19 support and treatment essential for living, working, and 5 20 participating fully in the community.

Section 225C.28A, Code 2005, is amended to read as Sec. 8. 5 22 follows:

225C.28A SERVICE QUALITY STANDARDS.

As the state participates more fully in funding services 25 and other support to persons with mental retardation, 5 26 developmental disabilities, brain injury, or chronic mental 5 27 illness, it is the intent of the general assembly that the 5 28 state shall seek to attain the following quality standards in 5 29 the provision of the services:

1. Provide comprehensive evaluation and diagnosis adapted 31 to the cultural background, primary language, and ethnic

32 origin of the person.

2. Provide an individual treatment, habilitation, and

5 34 program plan. 5 35

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3. Provide individualized treatment, habilitation, and program services that are individualized, provided to produce results, flexible, and cost=effective, as appropriate.

4. Provide periodic review of the individual plan.

5. Provide for the least restrictive environment and age=

appropriate services.

6. Provide appropriate training and employment opportunities so that the person's ability to contribute to 8 and participate in the community is maximized.

6 9 7. Provide an ongoing process to determine the degree of access to and the effectiveness of the services and other support in achieving the disability services outcomes and 6 6 6 12 indicators identified by the commission pursuant to section 225C.6.

Section 331.439, subsection 1, paragraph b, 6 15 subparagraphs (2) and (3), Code Supplement 2005, are amended 6 16 to read as follows:

(2) For informational purposes, the county shall submit a 6 18 management plan review to the department of human services by 6 19 April December 1 of each year. The annual review shall 6 20 incorporate an analysis of the data associated with the 6 21 services managed during the preceding fiscal year by the 6 22 county or by a managed care entity on behalf of the county. 6 23 The annual review shall also identify measurable outcomes and 6 24 results showing the county's progress in fulfilling the 6 25 purposes listed in paragraph "bb", and in achieving the 6 26 disability services outcomes and indicators identified by the

27 commission pursuant to section 225C.6.

6 28 (3) For informational purposes, every three years the 6 29 county shall submit to the department of human services a 6 30 three=year strategic plan. The strategic plan shall describe 31 how the county will proceed to attain the plan's goals and 6 32 objectives contained in the strategic plan for the duration of 33 the plan, and the measurable outcomes and results necessary 34 for moving the county's service system toward an

35 individualized, community=based focus in accordance with 1 paragraph "bb". The three=year strategic plan shall be submitted by April 1, 2000, and by April 1 of every third year 3 thereafter.

Section 331.439, subsection 1, Code Supplement Sec. 10. 2005, is amended by adding the following new paragraphs:

NEW PARAGRAPH. bb. The county implements its county management plan under paragraph "b" and other service management functions in a manner that seeks to achieve all of the following purposes identified in section 225C.1 for 7 10 persons who are covered by the plan or are otherwise subject 7 11 to the county's service management functions:

(1) The service system seeks to empower persons to 12 exercise their own choices about the amounts and types of 13 services and other support received. 7 15

(2) The service system seeks to empower the persons to 7 16 accept responsibility, exercise choices, and take risks.

7 17 (3) The service system seeks to provide services and other 7 18 support that are individualized, provided to produce results, 19 flexible, and cost=effective.

(4) The service system seeks to provide services and other 21 supports in a manner which supports the ability of the persons 22 to live, learn, work, and recreate in communities of their 23 choice.

7 24 <u>NEW PARAGRAPH</u>. bbb. Commencing with the fiscal year 7 25 beginning July 1, 2007, the county management plan under

7 26 paragraph "bb" shall do both of the following: (1) Describe how the county will provide services and 7 28 other support that are individualized, provided to produce 7 29 results, flexible, and cost=effective in accordance with 7 30 paragraph "bb", subparagraph (3). (2) Describe how the ability of the individuals covered by 32 the plan to live, learn, work, and recreate in communities of 33 the individuals' choice will be enhanced as provided in 34 paragraph "bb", subparagraph (4). Sec. 11. Section 426B.5, Code Supplement 2005, is amended 7 35 8 by adding the following new subsection: NEW SUBSECTION. 3. INCENTIVE POOL.
a. An incentive pool is created in the property tax relief 8 8 4 fund. The incentive pool shall consist of the moneys credited 5 to the incentive pool by law. 8 8 b. Moneys available in the incentive pool for a fiscal 8 year shall be distributed to those counties that either meet 8 8 or show progress toward meeting the purposes described in 8 9 section 331.439, subsection 1, paragraph "bb". The moneys 8 10 received by a county from the incentive pool shall be used to 8 11 build community capacity to support individuals covered by the 8 12 county's management plan approved under section 331.439, in 8 13 meeting such purposes. 8 14 Sec. 12. APPLICABILITY DATE. The section of this division 8 15 of this Act amending section 426B.5 is first applicable for 8 16 allowed growth funding distributed in the fiscal year 8 17 beginning July 1, 2008. 8 18 DIVISION II 8 19 FINANCIAL ELIGIBILITY Sec. 13. Section 225C.6, subsection 1, paragraph m, Code 2005, is amended to read as follows:

m. Identify model basic financial eligibility guidelines 8 20 8 21 8 22 8 23 standards for disability services. The standards shall include but are not limited to the following:

(1) A financial eligibility standard providing that 8 8 25 person with an income equal to or less than one hundred fifty 8 27 percent of the federal poverty level, as defined by the most 28 recently revised poverty income quidelines published by the 29 United States department of health and human services, 30 eligible for disability services paid with public funding. However, a county may apply a copayment requirement for a particular disability service to a person with an income equal 8 33 to or less than one hundred fifty percent of the federal 34 poverty level, provided the disability service and the 8 35 copayment amount both comply with rules adopted by the 1 commission applying uniform standards with respect to 2 copayment requirements. A person with an income above one 3 hundred fifty percent of the federal poverty level may be 4 eligible subject to a copayment or other cost=sharing 5 arrangement subject to limitations adopted in rule by the 6 commission. (2) A requirement that a person who is eligible for 8 federally funded services and other support must apply for the 9 services and support. (3) Resource limitations that are derived from the federal supplemental security income program limitations. A person 9 12 with resources above the federal supplemental security income 9 13 program limitations may be eligible subject to limitations 9 14 adopted in rule by the commission. If a person does not 9 15 qualify for federally funded services and other support but 16 meets income, resource, and functional eligibility 17 requirements, the following types of resources shall 9 18 disregarded: 9 19 (a) A retirement account that is in the accumulation 9 20 stage. 9 21 (b) A burial, medical savings, or assistive technology account.
Sec. 14. 9 ALLOWED GROWTH FUNDING STUDY. A study committee 23 9 24 shall be established by the legislative council for the 2006 9 25 legislative interim to review the formulas used for

Sec. 14. ALLOWED GROWTH FUNDING STUDY. A study committee shall be established by the legislative council for the 2006 legislative interim to review the formulas used for distribution of state mental health, mental retardation, and the funding to counties and other public funding for the services. In the purposes of the review include but are not limited to examining the public sources of the funding and programming for the services and to determine whether the formulas are effective in distributing funds to counties in a manner that set serves Iowans with disabilities while enabling the state and counties to budget effectively for providing the services. The study committee shall hear testimony and provide an opportunity for discussion with counties, advocates for

10 2 persons with disabilities, and other interested parties. 10 3 membership of the study committee shall include at least six 10 4 members of the senate and five members of the house of 5 representatives. In addition, the membership shall include 6 four ex officio, nonvoting members with two representing the 10 10 10 Iowa state association of counties, one representing the 10 8 department of human services, and one representing the mental 10 health, mental retardation, developmental disabilities, and 10 10 brain injury commission. It is the intent of the general 10 11 assembly that the study committee submit a report with findings and recommendations to the governor, the general 10 12 assembly, and the commission on or before January 1, 2007. 10 13 10 14 DIVISION III 10 15 CENTRAL POINT OF COORDINATION PROCESS == COUNTY OF RESIDENCE 10 16 RESPONSIBILITIES AND STATE CASES 10 17 Section 249A.12, subsection 8, as enacted by 2006 10 18 10 19 Iowa Acts, House File 2492, section 1, is amended by striking the subsection and inserting in lieu thereof the following: 10 20 8. If a person with mental retardation has no legal 10 21 settlement or the legal settlement is unknown so that the 10 22 person is deemed to be a state case and services associated 10 23 with the mental retardation can be covered under a medical 10 24 assistance home and community=based waiver or other medical 10 25 assistance program provision, the nonfederal share of the 10 26 medical assistance program costs for such coverage shall be 10 27 paid from the appropriation made for the medical assistance 10 28 program. 10 29 Sec. 16. Section 331.440, Code 2005, is amended by adding 10 30 the following new subsection: 10 31 NEW SUBSECTION. 1A. For the purposes of this section, 10 32 unless the context otherwise requires: 10 33 "Adult person" means a person who is age eighteen or 10 34 older and is a United States citizen or a qualified alien as 10 35 defined in 8 U.S.C. } 1641. b. "County of residence" means the county in this state in 11 which, at the time an adult person applies for or receives 11 11 3 services, the adult person is living and has established an ongoing presence with the declared, good faith intention of living for a permanent or indefinite period of time. The 11 11 6 county of residence of an adult person who is a homeless 11 person is the county where the homeless person usually sleeps.
c. "Homeless person" means the same as defined in section 11 11 8 c. 11 48A.2. 9 "State case services and other support" means the 11 10 d. 11 11 mental health, mental retardation, and developmental 11 12 disabilities services and other support paid for under the 11 13 rules and requirements in effect prior to October 1, 2006, 11 14 from the annual appropriation made to the department of human 11 15 services for such services and other support provided to 11 16 persons who have no established county of legal settlement or 11 17 the legal settlement is unknown so that the person is deemed 11 18 to be a state case. Such services and other support do not 11 19 include medical assistance program services or services 11 20 provided in a state institution. 11 21 Sec. 17. Section 331.440, subsection 3, Code 2005, is 11 22 amended to read as follows: 11 23 3. An application for services may be made through the 11 24 central point of coordination process of a an adult person's 25 county of residence. However, if a Effective July 1, 2007, 11 26 an adult person who is subject to a central point of 11 27 coordination process has legal settlement in another county. 11 28 or the costs of services or other support provided to the 11 29 person are the financial responsibility of the state, an -11 30 authorization through the central point of coordination 31 process shall be coordinated with the person's county of legal 32 settlement or with the state, as applicable. The county of 11 33 residence and county of legal settlement of a person subject -11 34 to a central point of coordination process may mutually agree -11 35 that the central point of coordination process functions shall 1 be performed by the central point of coordination process of 12 1 12 2 12 3 12 4 12 5 12 6 12 7 12 8 12 9 12 10 2 the person's county of legal settlement residence in 3 accordance with the county of residence's management plan 4 approved under section 331.439 and the person's county of 5 legal settlement is responsible for the cost of the services 6 or other support authorized at the rates reimbursed by the 7 county of residence. At the time services or other support 8 are authorized, the county of residence shall send the county 9 of legal settlement a copy of the authorization notice.
0 Sec. 18. Section 331.440, Code 2005, is amended by adding 12 11 the following new subsection:

NEW SUBSECTION. 3A. Effective October 1, 2006, if an

12 13 adult person has no established county of legal settlement or 12 14 the legal settlement is unknown so that the person is deemed 12 15 to be a state case, the person's eligibility and the 12 16 authorization for state case services and other support shall 12 17 be determined by the adult person's county of residence in 12 18 accordance with that county's management plan approved under 12 19 section 331.439. The costs of the state case services and 12 20 other support provided for the person shall be the 12 21 responsibility of the person's county of legal residence. 12 22 funding appropriated to the department of human services for 12 23 purposes of the state case services and other support shall be 12 24 distributed as provided in the appropriation to the counties 12 25 of residence responsible for the costs. Sec. 19. EFFECTIVE DATE == COST PROJECTIONS == LEGISLATIVE 12 26

12 27 INTENT. 1. a. The section of this division of this Act that 12 29 amends section 331.440, subsection 3, takes effect July 1, 2007.

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This section, being deemed of immediate importance,

12 32 takes effect upon enactment, and the department shall begin 12 33 implementation upon enactment.

2. a. The department of human services and counties, in 12 35 consultation with the legislative services agency, shall 1 develop a methodology for distributing the funding 2 appropriated for the fiscal year beginning July 1, 3 state case services and other support, as defined in this 4 division of this Act, to counties for county residents who 5 receive state case services and other support, on and after 6 October 1, 2006. The methodology shall be based upon 7 historical usage, projected usage, and significant increases 8 anticipated in county costs. The department and counties 9 shall share with one another names and necessary information 13 10 concerning the individuals who have been identified by the 13 11 department or counties. The methodology shall provide for 13 12 quarterly distributions.

b. The base funding amount used for the distribution 13 14 methodology to counties shall be 75 percent of the amount 13 15 appropriated for state case services and other support plus 13 16 any reversions from the previous fiscal year's appropriation, 13 17 the amount transferred from block grant funding, and any other 13 18 source designated by law. The base funding amount may be 13 19 adjusted for relevant purposes that may include but are not 13 20 limited to an adjustment to reflect the expenditure savings 13 21 realized from renegotiation of the contract with the 13 22 contractor providing managed care for mental health services 13 23 made pursuant to this division of this Act.

13 24 c. Prior to September 1, 2006, the department shall meet 13 25 with each county to analyze the actual numbers of individuals 13 26 who are eligible for state case services and other support and 13 27 who as county residents will be the financial and management 13 28 responsibility of the county effective October 1, 2006, the 13 29 historical costs of state case services and other support 13 30 provided to such individuals by the department, the projected 13 31 increase in cost of providing state case services and other 13 32 support to such individuals in accordance with the county 13 33 management plan, and the projected cost to provide state case 13 34 services and other support at county reimbursement rates in 35 lieu of the capped reimbursement rates paid by the state. 1 purpose of the analysis is for the department, in consultation 2 with each county, to determine by September 1, 2006, an amount 3 needed for the county to fund state case services and other support for county residents for the period beginning October 5 1, 2006, and ending June 30, 2007. If a county disputes the 6 department's determination of the amount needed by the county, the county may appeal the determination to the director of 8 human services. The county shall file the appeal within 30 14 9 days of the issuance date of the determination. The 14 10 director's decision shall be considered to be a final agency 14 11 decision and may be appealed as provided in chapter 17A. 14 12 While an appeal is pending, the department shall provide 14 13 funding to the county for state cases in the amount determined 14 14 by the department, subject to later adjustment based upon the

14 15 outcome of the appeal. d. If the aggregate of the amounts determined for each 14 16 14 17 county, as provided in paragraph "c", exceeds the base funding 14 18 amount determined under paragraph "b", notwithstanding section 14 19 331.440, subsection 3A, as enacted by this division of this 14 20 Act, the department of human services shall retain 14 21 responsibility for the costs of state case services and other 14 22 support for persons deemed to be a state case through June 30, 14 23 2007. The department shall report to the governor and general 14 24 assembly on or before December 1, 2006, recommendations to 14 25 address the funding shortfall.

14 26 14 27 e. If the aggregate of the amounts determined for each county, as provided in paragraph "c", is less than the base 14 28 funding amount determined under paragraph "b", the amounts 14 29 determined shall be distributed to the counties and the excess 14 30 amount shall be reserved for distribution as provided in 14 31 paragraph "f".
14 32 f. (1) If a county becomes responsible for a new 14 32

14 33 individual state case whose costs were not included in the 14 34 amounts determined under paragraph "c", the county shall 14 35 supply the individual's application and service and other support needs to the department for an eligibility determination and identification of funding availability. the county disputes the department's determination, the appeal 4 provisions under paragraph "c" shall apply.

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(2) If an existing state case has a change in condition 6 that results in significant additional costs that cannot be offset by savings from other state cases or other means, the 8 county may apply to the department for relief to address the 15 9 additional costs. Relief payments approved by the department 15 10 shall be paid from the excess amount reserved under paragraph 15 11 "e" and are limited to that amount. In addition, if a county 15 12 has such additional costs and either did not apply for relief 15 13 or the application was denied in whole or in part because at 15 14 the time of the application the excess amount reserved under 15 15 paragraph "e" was projected to be insufficient, the county may 15 16 apply for any funds from any excess amount available under 15 17 paragraph "e" that would otherwise remain unexpended or 15 18 unobligated at the close of the fiscal year. Otherwise, the 15 19 state liability for the cost of the state case services and 15 20 other support authorized by a county of residence is limited 15 21 to the amount distributed to the county.

g. The state's liability for state case services and other 15 23 support for the fiscal year beginning July 1, 2006, is limited 15 24 to the amount appropriated.

h. The provisions of this subsection shall be adopted in 15 26 rule as necessary to implement the provisions. The mental 15 27 health, mental retardation, developmental disabilities, and 15 28 brain injury commission may adopt administrative rules under 15 29 section 17A.4, subsection 2, and section 17A.5, subsection 2, 15 30 paragraph "b", to implement the provisions and the rules shall 15 30 paragraph "b", 15 31 become effective immediately upon filing or on a later 15 32 effective date specified in the rules, unless the effective 15 33 date is delayed by the administrative rules review committee. 15 34 Any rules adopted in accordance with this subsection shall not 15 35 take effect before the rules are reviewed by the administrative rules review committee. The delay authority 2 provided to the administrative rules review committee under 3 section 17A.4, subsection 5, and section 17A.8, subsection 9, 4 shall be applicable to a delay imposed under this subsection, 5 notwithstanding a provision in those sections making them inapplicable to section 17A.5, subsection 2, paragraph "b" Any rules adopted in accordance with the provisions of this subsection shall also be published as notice of intended action as provided in section 17A.4.

3. Each county that would need to amend the county's 16 11 management plan for services approved under section 331.439 in order to implement the provisions of this division of this Act 16 12 16 13 amending section 331.440, subsection 3, to take effect on July 1, 2007, shall develop and submit projections of the costs to 16 14 16 15 the county to implement the provisions. The projections shall identify costs in the initial and succeeding fiscal years. 16 16 16 17 The projections shall be submitted on December 1, 2006, along 16 18 with the county's expenditure report submitted pursuant to 16 19 section 331.439, subsection 1, paragraph "a". The 16 20 projections, along with any findings and recommendations 16 21 identified by the county, shall be submitted at the same time 16 22 to the department of human services, the mental health, mental 16 23 retardation, developmental disabilities, and brain injury 16 24 commission, and the general assembly.

The department of human services shall renegotiate the 16 26 department's contract with the contractor providing managed 16 27 care for mental health services under the medical assistance 16 28 program so that any responsibility for the contractor to 16 29 manage state case services and other support, as defined by 16 30 this division of this Act, will end on or before September 30, 16 31 2006. The expenditure savings realized from making this 16 32 change shall remain with the state case appropriation for 16 33 distribution to counties of residence.

5. The department of human services and counties shall

16 35 work with the department's consultant to develop a proposal 1 for a case rate system that may be used in subsequent fiscal 17 17 2 years for distributing funding to counties for the state case 3 services and other support provided to county residents. The 4 case rate system proposal developed is subject to approval by 17 17 17 5 the mental health, mental retardation, developmental 17 6 disabilities, and brain injury commission, shall be submitted 17 to the governor and general assembly in January 2007, and 17 shall not be implemented unless a statute specifically 17 9 authorizing implementation of the system is enacted. 17 10 DIVISION IV DIVISION NAME CHANGE 17 11 17 12 Sec. 20. Section 135C.25, subsection 1, Code 2005, is 17 13 amended to read as follows: 17 14 1. Each health care facility shall have a resident 17 15 advocate committee whose members shall be appointed by the 17 16 director of the department of elder affairs or the director's 17 17 designee. A person shall not be appointed a member of a 17 18 resident advocate committee for a health care facility unless 17 19 the person is a resident of the service area where the 17 20 facility is located. The resident advocate committee for any 17 21 facility caring primarily for persons with mental illness, 17 22 mental retardation, or a developmental disability shall only

17 23 be appointed after consultation with the administrator of the 17 24 division of mental health and developmental disabilities 17 25 disability services of the department of human services on the 17 26 proposed appointments. Recommendations to the director or the 17 27 director's designee for membership on resident advocate 17 28 committees are encouraged from any agency, organization, or 17 29 individual. The administrator of the facility shall not be 30 appointed to the resident advocate committee and shall not be 17 31 present at committee meetings except upon request of the 17 32 committee.

Sec. 21. Section 217.6, unnumbered paragraph 2, Code 2005, 17 34 is amended to read as follows:

The department of human services may be initially divided into the following divisions of responsibility: the division of child and family services, the division of mental health and developmental disabilities disability services, the division of administration, and the division of planning, research and statistics.

Sec. 22. Section 217.10, Code 2005, is amended to read as follows:

ADMINISTRATOR OF DIVISION OF MENTAL HEALTH AND 217.10 DEVELOPMENTAL DISABILITIES DISABILITY SERVICES

The administrator of the division of mental health and 18 11 developmental disabilities disability services shall be 18 12 qualified as provided in section 225C.3, subsection 3. 18 13 administrator's duties are enumerated in section 225C.4.

Sec. 23. Section 221.2, Code 2005, is amended to read as follows:

221.2 ADMINISTRATOR.

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Pursuant to the compact, the administrator of the division 18 18 of mental health and developmental disabilities disability services of the department of human services shall be the 18 20 compact administrator. The compact administrator may 18 21 cooperate with all departments, agencies, and officers of this 18 22 state and its subdivisions in facilitating the proper 18 23 administration of the compact and of any supplementary 18 24 agreement entered into by this state under the compact.
18 25 Sec. 24. Section 225C.2, subsections 1 and 7, Code 2005,

18 26 are amended to read as follows:

- 1. "Administrator" means the administrator of the division 18 27 18 28 of mental health and developmental disabilities of the department of human services. 18 30
- 7. "Division" means the division of mental health and 18 31 developmental disabilities disability services of the 18 32 department of human services.
 - Sec. 25. Section 225C.13, subsection 2, Code Supplement 2005, is amended to read as follows:
 2. The <u>division</u> administrator of the <u>division</u> of mental
- 18 35 health and developmental disabilities may work with the 19 2 appropriate administrator of the department's institutions to 19 3 establish mental health and mental retardation services for 19 4 all institutions under the control of the director of human 5 services and to establish an autism unit, following mutual 19 19 6 planning and consultation with the medical director of the 19 7 state psychiatric hospital, at an institution or a facility 8 administered by the department to provide psychiatric and 19 9 related services and other specific programs to meet the needs 19 19 10 of autistic persons, and to furnish appropriate diagnostic

19 11 evaluation services. Sec. 26. Section 230A.1, Code 2005, is amended to read as 19 12 19 13 follows: 19 14 ESTABLISHMENT AND SUPPORT OF COMMUNITY MENTAL 230A.1 19 15 HEALTH CENTERS. 19 16 A county or affiliated counties, by action of the board or 19 17 boards of supervisors, with approval of the administrator of 19 18 the division of mental health and developmental disabilities 19 19 disability services of the department of human services, may 19 20 establish a community mental health center under this chapter 19 21 to serve the county or counties. This section does not limit 19 22 the authority of the board or boards of supervisors of any 19 23 county or group of counties to continue to expend money to 19 24 support operation of the center, and to form agreements with 19 25 the board of supervisors of any additional county for that 19 26 county to join in supporting and receiving services from or

19 27 through the center. 19 28 Sec. 27. Section Sec. 27. Section 230A.13, unnumbered paragraph 2, Code 2005, is amended to read as follows:

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19 30 Release of administrative and diagnostic information, as 19 31 defined in section 228.1, subsections 1 and 3, and demographic 19 32 information necessary for aggregated reporting to meet the 19 33 data requirements established by the department of human 19 34 services, division of mental health and developmental 35 disabilities disability services, relating to an individual 1 who receives services from a community mental health center 2. through the applicable central point of coordination process, may be made a condition of support of that center by any county under this section.

Sec. 28. Section 230A.16, unnumbered paragraph 1, Code 2005, is amended to read as follows:

The administrator of the division of mental health and 8 developmental disabilities disability services of the 9 department of human services shall recommend and the mental 20 10 health, mental retardation, developmental disabilities, and 20 11 brain injury commission shall adopt standards for community 20 12 mental health centers and comprehensive community mental 20 13 health programs, with the overall objective of ensuring that 20 14 each center and each affiliate providing services under 20 15 contract with a center furnishes high quality mental health 20 16 services within a framework of accountability to the community 20 17 it serves. The standards shall be in substantial conformity 20 18 with those of the psychiatric committee of the joint 20 19 commission on accreditation of health care organizations and 20 20 other recognized national standards for evaluation of 20 21 psychiatric facilities unless in the judgment of the 20 22 administrator of the division of mental health and 20 23 developmental disabilities disability services, with approval 20 24 of the mental health, mental retardation, developmental 20 25 disabilities, and brain injury commission, there are sound When recommending 20 26 reasons for departing from the standards. 20 27 standards under this section, the administrator of the 20 28 division shall designate an advisory committee representing 20 29 boards of directors and professional staff of community mental 20 30 health centers to assist in the formulation or revision of 20 31 standards. At least a simple majority of the members of the 20 32 advisory committee shall be lay representatives of community 20 33 mental health center boards of directors. At least one member 20 34 of the advisory committee shall be a member of a county board 20 35 of supervisors. The standards recommended under this section shall include requirements that each community mental health center established or operating as authorized by section

230A.1 shall: Sec. 29. Section 230A.16, subsection 3, Code 2005, is amended to read as follows:

3. Arrange for the financial condition and transactions of the community mental health center to be audited once each 8 year by the auditor of state. However, in lieu of an audit by 9 state accountants, the local governing body of a community 21 10 mental health center organized under this chapter may contract 21 11 with or employ certified public accountants to conduct the 21 12 audit, pursuant to the applicable terms and conditions 21 13 prescribed by sections 11.6 and 11.19 and audit format 21 14 prescribed by the auditor of state. Copies of each audit 21 15 shall be furnished by the accountant to the administrator of 21 16 the division of mental health and developmental disabilities, 21 17 disability services and the board of supervisors supporting 21 18 the audited community mental health center.
21 19 Sec. 30. Section 230A.17, Code 2005, is amended to read as

21 20 follows:

²³⁰A.17 REVIEW AND EVALUATION.

21 22 The administrator of the division of mental health and 21 23 developmental disabilities disability services of the 21 24 department of human services may review and evaluate any 21 25 community mental health center upon the recommendation of the 21 26 mental health, mental retardation, developmental disabilities, 21 27 and brain injury commission, and shall do so upon the written 21 28 request of the center's board of directors, its chief medical 21 29 or administrative officer, or the board of supervisors of any 21 30 county from which the center receives public funds. 21 31 of the review shall be paid by the division.

Section 262.70, Code 2005, is amended to read as Sec. 31. 21 33 follows:

262.70 EDUCATION, PREVENTION, AND RESEARCH PROGRAMS IN 21 35 MENTAL HEALTH AND MENTAL RETARDATION DISABILITY SERVICES.

The division of mental health and developmental 2 disabilities disability services of the department of human 3 services may contract with the board of regents or any 4 institution under the board's jurisdiction to establish and 5 maintain programs of education, prevention, and research in 6 the fields of mental health, and mental retardation, 7 developmental disabilities, and brain injury. The board 8 delegate responsibility for these programs to the state The board may 9 psychiatric hospital, the university hospital, or any other 22 10 appropriate entity under the board's jurisdiction.

Section 331.440A, subsection 7, paragraph a, Sec. 32. 22 12 subparagraph (3), Code 2005, is amended to read as follows:

22 13 (3) One individual designated by the division of medical 22 14 services of the department of human services and one 22 15 individual designated by the division of mental health and 22 16 developmental disabilities disability services of the 22 17 department of human services.
22 18 Sec. 33. Section 331.756, subsection 45, Code Supplement

22 19 2005, is amended to read as follows:

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22 20 45. Appear on behalf of the administrator of the division 22 21 of mental health and developmental disabilities disability 22 22 services of the department of names better 22 23 application to transfer a person with mental illness who 22 services of the department of human services in support of an 22 24 becomes incorrigible and dangerous from a state hospital for 22 25 persons with mental illness to the Iowa medical and 22 26 classification center as provided in section 226.30.

22 27 Sec. 34. CODE EDITOR == NAME CHANGE DIRECTIVE. 22 28 editor shall revise the headnote to section 225C.3 to reflect 22 29 the change in the name of the division of mental health and 22 30 developmental disabilities to the division of mental health 22 31 and disability services made pursuant to this division of this 22 32 Act.

REQUIREMENT TO REESTABLISH DIVISION. Sec. 35. The general 22 34 assembly finds that the scope and importance of the department 22 35 of human services' duties under law involving mental health, 1 mental retardation, developmental disabilities, and brain 2 injury services justifies assigning those duties to a separate 3 division in place of the current practice in which the duties 4 are assigned to a division serving many disparate populations. 5 Therefore, during the fiscal year beginning July 1, 2006, 6 contingent upon the appropriation of funding for this purpose, 7 the director of human services shall reestablish a separate 8 division, to be known as the division of mental health and 23 9 disability services, and shall appropriately assign to that 23 10 division the department's duties under law involving such 23 11 services.

DIVISION V

REIMBURSEMENT PROVISIONS

Sec. 36. FY 2006=2007 MEDICAL ASSISTANCE PROGRAM 23 15 REIMBURSEMENT OF INPATIENT MENTAL HEALTH SERVICES, COMMUNITY 23 16 MENTAL HEALTH CENTERS, AND PSYCHIATRISTS. In combination with 23 17 any other reimbursement increases authorized by law for the 23 18 indicated providers, the department of human services shall 23 19 seek federal approval to amend the medical assistance program 23 20 state plan and shall amend the contract with the department's 23 21 managed care contractor for mental health services under the 23 22 program, in order to increase medical assistance program 23 23 reimbursement rates beginning October 1, 2006, to not more 23 24 than the maximum amounts indicated, for all of the following 23 25 providers:

- 23 26 1. Inpatient mental health services provided at hospitals 23 27 at the cost of the services, subject to Medicaid program upper 23 28 payment limit rules.
- 2. Community mental health centers and providers of mental 23 29 23 30 health services to county residents pursuant to a waiver 23 31 approved under section 225C.7, subsection 3, at 100 percent of 23 32 the reasonable costs for the provision of services to

23	33	recipients of medical assistan	ce.
23	34	3. Psychiatrists at the me	edical assistance program fee for
23	35	service rate.	2 5
24	1	Implementation of the provisions of this section is	
24	2	contingent upon receipt of federal approval and limited to the	
$\overline{24}$			amending the contract with the
		managed care contractor.	
$\overline{24}$		DIVISION VI	
$\frac{1}{24}$		STATE MANDATE	
	7		ACT. Section 25B.2, subsection
		3, shall not apply to this Act.	
24		s, bhair not appry to this het	•
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	12		CHRISTOPHER C. RANTS
	13		Speaker of the House
	$\frac{13}{14}$		speaker of the house
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	$\frac{17}{17}$		JEFFREY M. LAMBERTI
	18		President of the Senate
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	20	I hereby certify that this	bill originated in the House and
		is known as House File 2780, F	
	22	is known as noase rife 2700, i	righty-lilbe deneral Assembly.
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	25		MARGARET THOMSON
	26		Chief Clerk of the House
		Approved, 2006	
	28	Approved, 2000)
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		THOMAS J. VILSACK	
		Governor	
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